

# **Southeast Service Area**

## **Initial Safety Assessments 2<sup>nd</sup> Round - Safety Model QA Review**



**Nebraska Department of Health and Human Services  
Quality Assurance**

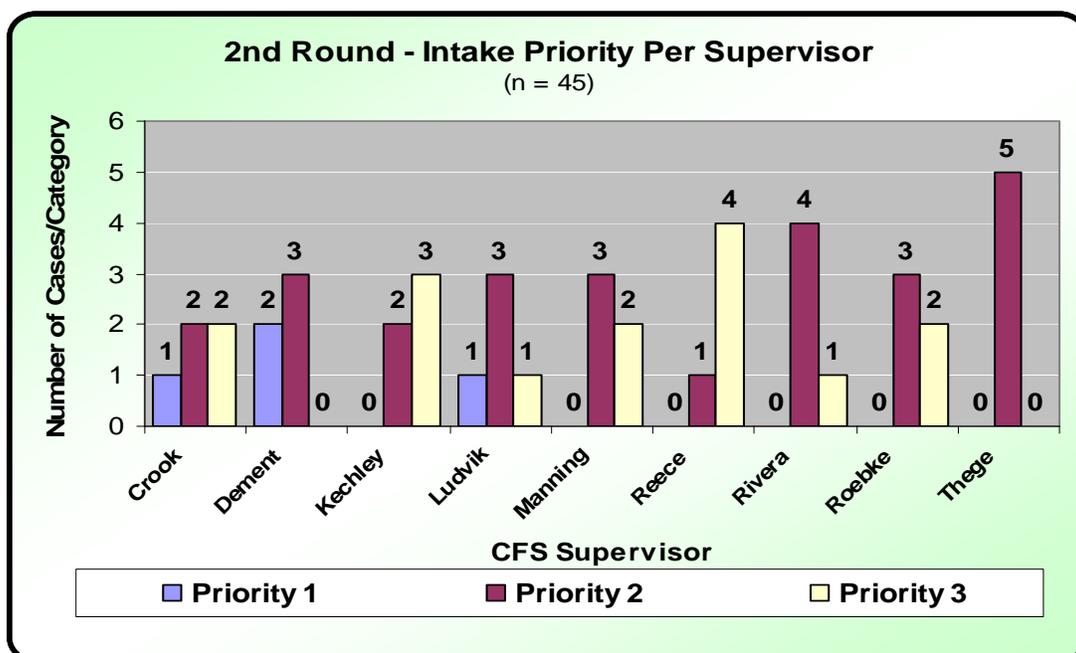
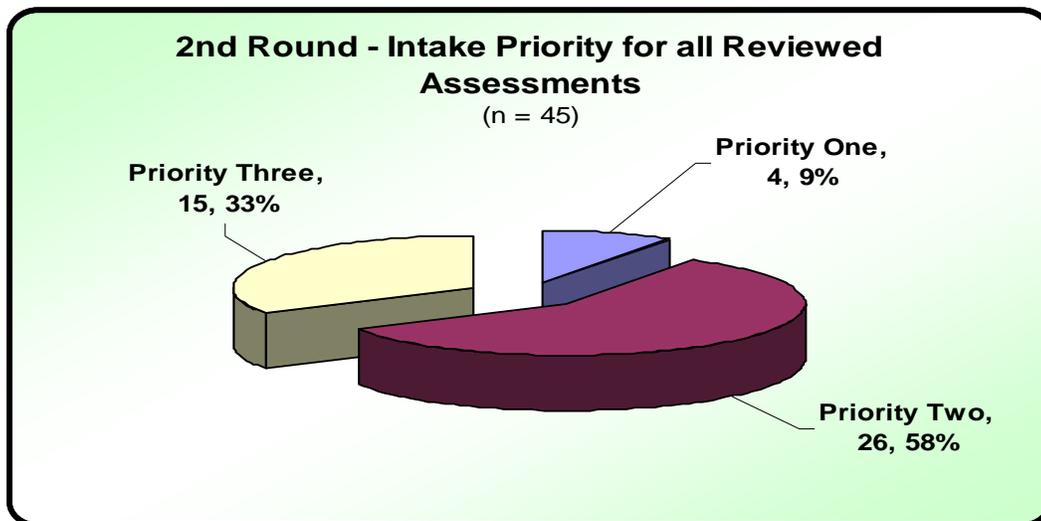
February 2009

Quality Assurance (QA) Team completed second round of Initial Safety Assessment Reviews in January 2009. A total of **45** finalized Safety Assessments were randomly selected by QA staff from nine Children and Family Services Supervisors (CFSS). Review consisted of five assessments from each SESA Supervisor: Carla Crook, Monica Dement, Lesa Kechley, Holly Ludvik, Jennifer Manning, Chris Reece, Pamela Rivera, Krista Roebke, and Darcy Thege.

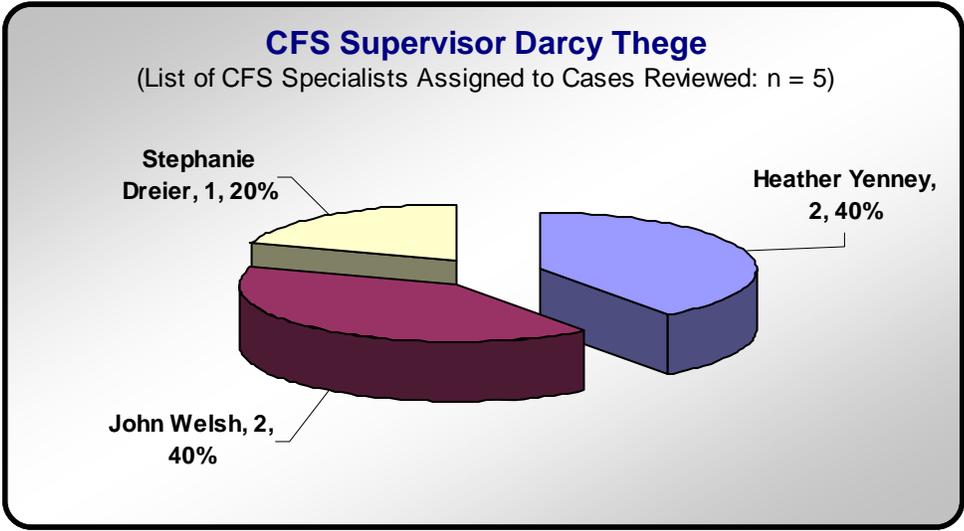
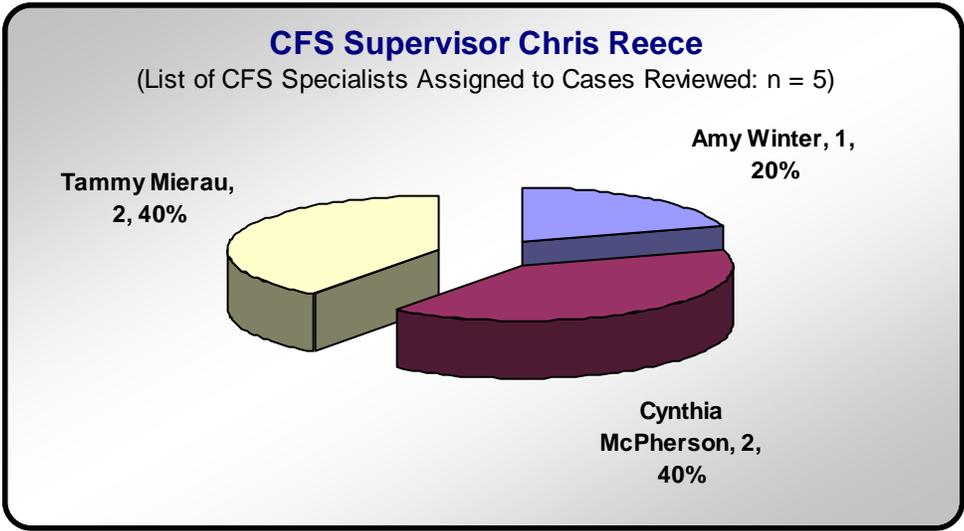
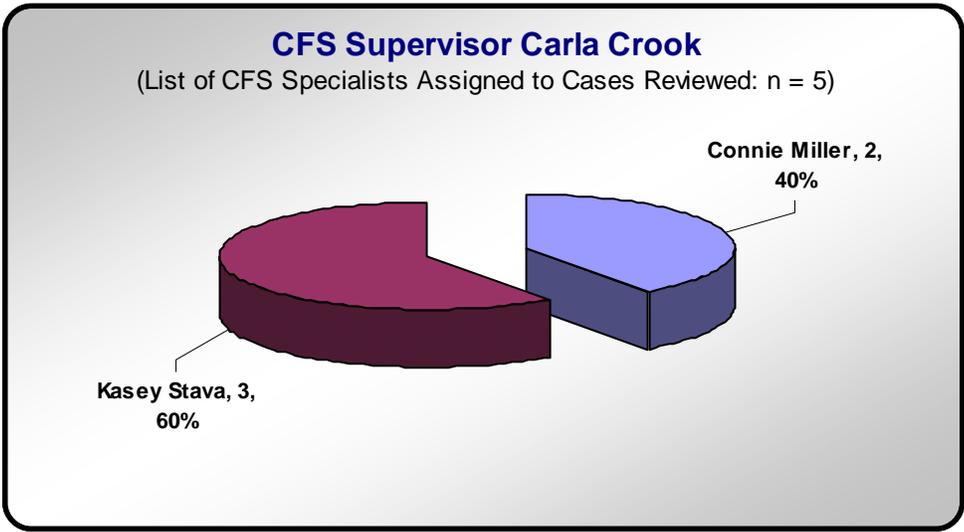
The first round of reviews of Initial Safety Assessment for SESA was completed in May 2008. A total of **106** finalized Safety Assessments were submitted to QA staff from seven Children and Family Services Supervisors in SESA. The reviews consisted of sixteen assessments from Supervisor Sara Jelinek and fifteen assessments from each of the following Supervisors: Carla Crook, Chris Reece, Jodi Allen, Krista Roebke, Lesa Kechley and Tracy Lunney.

**This report contains detailed information from the 2<sup>nd</sup> Round of Initial Assessment Reviews.**

**Intake Priority (45 assessments reviewed): 4 were Priority One, 26 were Priority Two and 15 were Priority Three.**

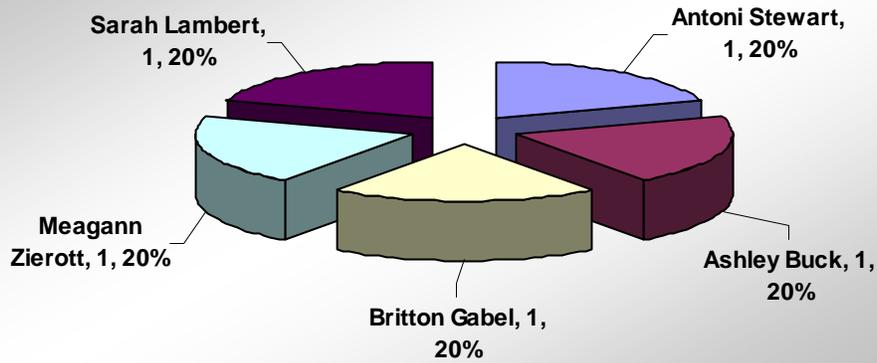


The following charts contain a breakdown of reviewed assessments per worker for each Children and Family Services Supervisor:



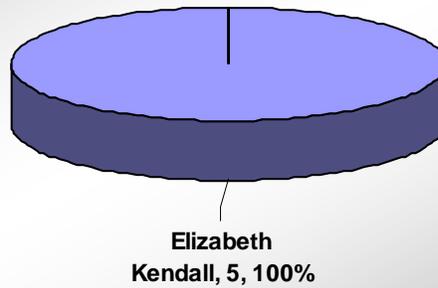
### CFS Supervisor Holly Ludvik

(List of CFS Specialists Assigned to Cases Reviewed: n = 5)



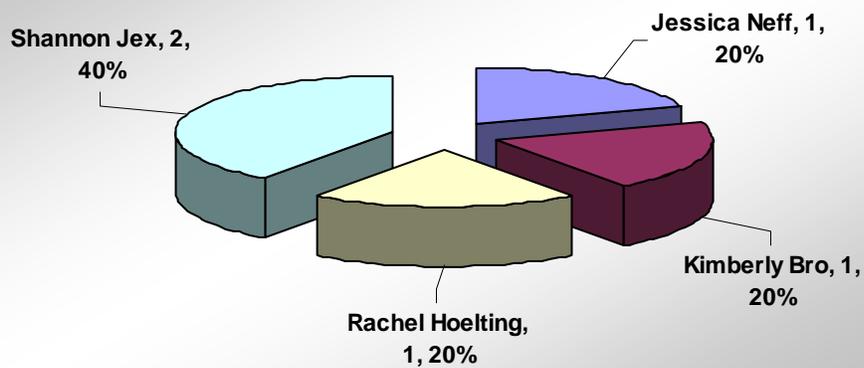
### CFS Supervisor Jennifer Manning

(List of CFS Specialists Assigned to Cases Reviewed: n = 5)



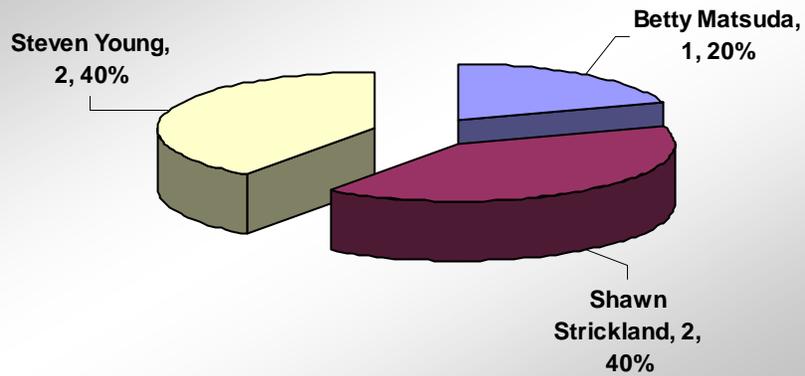
### CFS Supervisor Krista Roebke

(List of CFS Specialists Assigned to Cases Reviewed: n = 5)



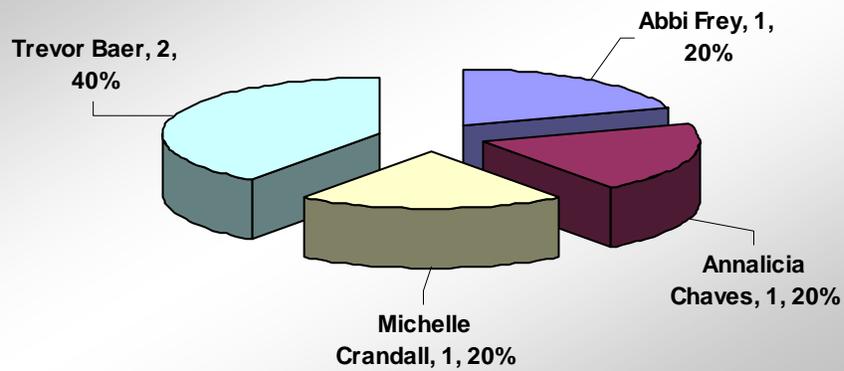
### CFS Supervisor Lesa Kechley

(List of CFS Specialists Assigned to Cases Reviewed: n = 5)



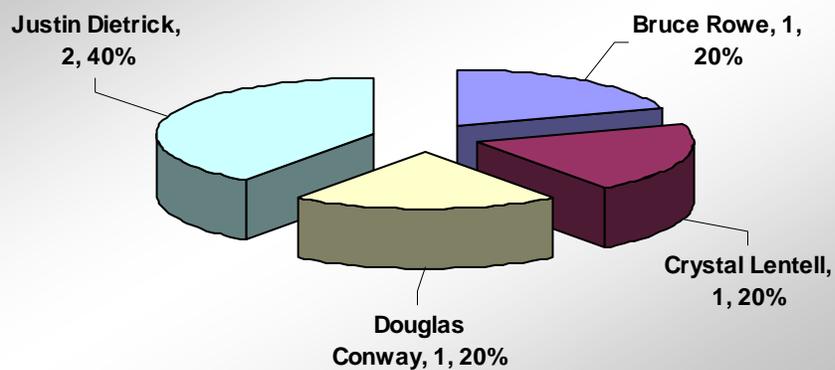
### CFS Supervisor Monica Dement

(List of CFS Specialists Assigned to Cases Reviewed: n = 5)



### CFS Supervisor Pamela Rivera

(List of CFS Specialists Assigned to Cases Reviewed: n = 5)



The following is a summary of 2<sup>nd</sup> Round Data from ALL 45 Initial Safety Assessment reviews. Please note that some reviewer comments were included in this report for several of the items that were reviewed. Charts for this overall data can be found in the attached excel file: *SESA Comparison Charts*. Charts in the excel attachment compares 1<sup>st</sup> Round and 2nd Round Initial Safety Assessment Reviews.

#### ***Initial Response/Contact Information (Chart 1):***

- Initial contact with child victim was made within required time frame in 71% of the Safety Assessments (32 out of 45 instances).
- Other children in the household were present in 36% or 16 of 45 of the reviewed assessments. Other children in the household were interviewed in 14 out of 16 instances (88%).
- 18 out of 45 (40%) of the reviewed assessments had a non-maltreating caregiver listed in the intake. The non-maltreating caregiver was interviewed in 17 out of 18 instances (94.4%).
- Other adults were present in 16% or 7 out of 45 of the reviewed assessments. Other adults in the home were interviewed in 3 out of 7 instances (43%).
- Interviews with the maltreating caregiver occurred in 38 out of 44 instances or 86% of the reviewed assessments. One of the assessments was completed on an intake that did not list a perpetrator's name.
- Interview protocol was followed in 47% or 21 out of 45 assessments. For those assessments that did not follow protocol, reviewers were unable to find documentation to indicate the reason for the deviation from protocol in 22 out of 24 assessments (92%).
  - *Reviewer Comments: The contact sheet is hard to follow and suggest the same date and time of interviews for different individuals even though they took place at different locations; maltreating caregiver was interviewed before one of the children (victim) was interviewed; children were not interviewed privately; other adults in the home were not interviewed.*

#### ***Present Danger (Chart 2):***

- Present danger at the initial contact with the child victim and/or family was identified in NONE the reviewed assessments.
- Reviewers agreed with the worker's assessment of Present Danger in ALL instances (100%).

#### ***Domains (Chart 5):***

- **Maltreatment** – Sufficient information was collected in 91% (41 out of 45) of the assessments.
  - *Reviewer Comments: Interview or include information for everyone listed as perpetrators. Include findings/conclusions and evidence to support findings, include removal of child, address all areas of concern in the intake. Caution run on narratives, information needs to be separated into other domain areas. There were no details about circumstances related to current maltreatment. Appears that the only information included in this section was statements that were made in the intake. Discuss in maltreatment the "corroborating statements".*
- **Nature** – Sufficient information was collected in 71% (32 out of 45) of the assessments.
  - *Reviewer Comments: Summarize and discuss the major influences of the overarching causes to abuse and neglect. Include analysis of events/factors surrounding the abuse and neglect. Include pattern of why the abuse and neglect is occurring in the home. Include information about circumstances of past removals and whether or not those circumstances relate to current maltreatment. Need to provide brief summary of the factors leading to the CAN contained in the intakes.*

- **Child Functioning** – Sufficient information was collected in 80% (36 out of 45) of the assessments.
  - *Reviewer Comments: What conclusions can be drawn from the worker's contact with all parties regarding the child's behavior and development? Discuss nature of peer interactions, include worker's observation of child (ren), and include description of overarching statements surrounding child's development or behavioral difficulties. Need to assess all children living in home.*
- **Disciplinary Practices** – Sufficient information was collected in 62% (28 out of 45) of the assessments.
  - *Reviewer Comments: When do the caregivers have to implement discipline...what behaviors are the children exhibiting? Include situations and detailed information in which the parent implements discipline for the child(ren). Address the purpose of discipline. Address future discipline plans in assessments involving infants. Include children's statements of discipline in home and patterns of discipline with older children.*
- **General Parenting** – Sufficient information was collected in 64% (29 out of 45) of the assessments.
  - *Reviewer Comments: Include information about routines within the home. Include past parenting of children that may have been relinquished or terminated. Include information about family activities, family routine, and parental roles. Include parenting for all individuals living in the home if they take role in caring for the children (i.e. need to include grandmother in this domain area as she is living in the home and appears to be taking an active role in assisting her daughter/granddaughter. Need to add the knowledge of child development/parenting in regards to Mom having completed a parenting class in the past-how has she used what she has learned from that? Expand on the rules and chores within the home -, are they reasonable for the children's ages? Is the structure consistent?*
- **Adult Functioning** – Sufficient information was collected in 64% (29 out of 45) of the assessments.
  - *Reviewer Comments: Need to include information for ALL adults living in the home; include information about community or family supports, include information for each adult's Mental Health, Domestic Violence and Substance Abuse, talk about the nature of adult relationships within the home (marriage and other relationships). Need to include adult functioning information for the grandmother who lives in the home. Need to discuss employment information and financial supports. What is the nature of mom and dad's current relationship?*

**Collateral Source (Chart 5):**

- 44 out of the 45 assessments indicated that information should have been collected from a collateral source. Collateral information was collected in 86% or 38 out the 44 assessments.
  - *Reviewer Comments: Incorporate the information gained from collaterals into the assessment. Information was not obtained from collateral contacts to corroborate statements made by caregivers in the assessment. Should have talked to school officials or other collaterals to get needed child functioning information.*

### **Maternal/Paternal Relatives (Chart 5):**

- Maternal relatives were identified in 69% of the assessments (31 out of 45).
- Paternal relatives were identified in 62% of the assessments (28 out of 45).
  - *Reviewer Comments: Documentation needs to contain at a minimum first name, last name, and location (city & state). Include in documentation parents' refusal to provide extended family information during assessment.*

### **ICWA (Chart 5):**

- Information regarding ICWA was obtained in 73% of the assessments (33 out of 45).
  - *Reviewer Comments: Workers need to utilize the kinship narrative and include a statement as to how ICWA information was obtained by CFS Specialist. For example: If a worker states that ICWA does not apply to family or N/A, the worker needs to include a statement of how the worker learned that it did not apply.*

#### **Good examples include:**

- *Per mother/name and father/name child does not meet criteria for ICWA because of the following reason.*
- *Father was asked about enrollment or qualification he may meet in Native American Tribe in which he denied eligibility for him or his son.*
- *According to (parents/name), no Native American Tribal heritage exists within the family.*

### **Impending Danger (Charts 4 & 6):**

**Impending Danger at the initial contact with the youth and/or family (Chart 4):** The worker identified impending danger at the initial contact with the child and family in 33% or 15 out of the 45 reviewed assessments. **The reviewer agreed with the worker's decision in 89% or 40 out of the 45 reviewed assessments.**

- Reviewer disagreed with the worker in 5 of the assessments in which the worker indicated that there was NO impending danger at the initial contact with the child and family. The reviewers determined that there was not enough information in the assessment to make a determination of whether or not impending danger was present at worker's initial contact with the child and/or family.

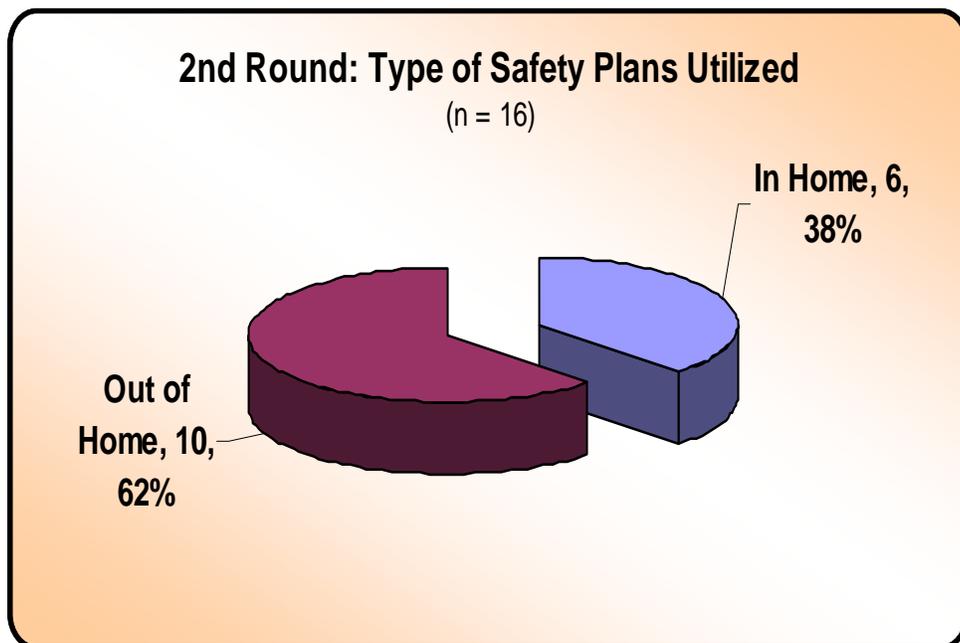
**Impending Danger at the end of the Initial Assessment (Chart 6):** The worker identified impending danger at the end of the initial assessment in 16 out of the 45 cases reviewed. Reviews of all 45 assessments indicate the following:

- 27 out of 45 (60%) of the reviewed assessments contained sufficient information to provide a reasonable understanding of family members and their functioning.
- 33 out of 45 (73%) of the reviewed assessments contained sufficient information to support and justify decision making.
- 30 out of 45 (67%) of the reviewed assessments contained sufficient information in the six domains to accurately assess the 14 factors.
- Safety threats were identified in 36% or 16 out of 45 of the reviewed assessments.
  - The reviewer agreed with the worker on all of the safety factors identified “**yes**” in 94% of these assessments (15 out of 16 instances).
    - Within the safety factors identified “**yes**”, 14 out of 16 (88%) contained threshold documentation for identification/justification of impending danger.
- The reviewer agreed with the worker on all of the safety factors identified “**no**” in 76% or 34 out of all 45 assessments reviewed.

- **Safety Assessment Conclusion:**
  - The worker determined that the child was UNSAFE at the conclusion of the safety assessment in 16 out of 45 (36%) of the reviewed assessments. The reviewer agreed with the worker's decision that the child was UNSAFE in all 16 assessments (100%).
  - The worker determined that the child was SAFE in 29 out of 45 (64%) of the reviewed assessments.
    - The reviewer agreed with the worker's decision that the child was SAFE in 69% or 20 out of these 29 assessments.
    - The reviewer disagreed with the worker's decision that the child was SAFE in 31% or 9 out of these 29 assessments. The reviewers determined that the information in these assessments were not sufficient to make a determination of safety (impending danger).
      - Although there was not enough information to make a determination of impending danger, these Safety Assessments did not rise to the level of Service Area Administrator notification.

**Safety Plan (Charts 7 & 8):** The worker determined that the child was unsafe in 36% or 16 out of the 45 reviewed assessments. Safety plans were established at the conclusion of the safety assessment in ALL 16 of these assessments (100%).

- 38% or 6 out of 16 of the safety plans were in home safety plans.
  - A reviewer indicated that the worker should have considered utilizing an out of home safety plan in one case in which an in of home safety plan was utilized.
- No combination safety plans were utilized.
- 62% or 10 out of 16 of the safety plans were out of home safety plans.
  - A reviewer indicated that the worker should have considered utilizing an in home safety plan in one case in which an out of home safety plan was utilized.



- 19% or 3 out of 16 safety plans completed contained a sufficient contingency plan.

**Examples of sufficient contingency plan:**

*Note: The intent of having a sufficient contingency plan is to have workers think ahead, anticipate situations that might come up and make a plan to deal with them. A good contingency plan is an actual backup plan with names and information of individual(s) that will take over or complete safety actions if the original safety plan participant is unable to do so. A good contingency plan is one that can prevent the need for immediate caseworker notification or action.*

**For Out of Home Safety Plans:**

1.) *If (NAME) approved relative provider is unable to care for the (child/youth), the relative care provider will contact the child's caseworker and the child will be placed with (NAME) another identified and approved relative provider.*

2.) *If (NAMES) foster parents are unable to care for the (child/youth), the foster parents will contact the child's caseworker and the child will be placed with (NAME) identified respite care provider or (NAME) identified traditional or agency foster care provider.*

**For IN Home Safety Plans:**

1.) *If (NAME) relative safety plan provider is unable to be at (NAME) family home as expected from 4-6pm. Then (NAME) will contact (NAME) another relative safety plan participant who will substitute for them during that time. If both are unavailable due to a family emergency then (NAME) the pastor's wife will substitute for them during that time.*

2.) *If (NAME) a contractor providing safety services for the family is unable to do what they agreed to do, they will notify the caseworker and (NAME) another safety service contractor will be utilized.*

**Examples of insufficient contingency plan;**

- 1) *The placement unit will need to find another placement.*
- 2) *Child will be made a state ward and placed into foster care.*
- 3) *This is an out of home safety plan and there is not a need for a backup plan.*
- 4) *The assigned caseworker should be contacted.*
- 5) *Their designee will take over*
- 6) *None*

- 56% of 9 out of 16 of the safety plan contained sufficient information to support the decision made with regards to suitability of safety plan participants.
  - *Reviewer Comments: Need to ensure suitability is completed for ALL participants including two-parent foster families, providers and informal supports. Include background checks on suitability.*
- 81% or 13 out of 16 safety plans addressed who was going to make sure the child was protected.
- 69% or 11 out of 16 safety plans addressed what action is needed.
- 75% or 12 out of 16 safety plans addressed where the plan and action are going to take place.
- 19% or 3 out of 16 safety plans addressed when the action will be finished.
  - *Reviewer Comments: Safety plans must be reviewed with the family on a timely basis even if there are no changes in the family situation. The safety plan document states that safety plans will be reviewed weekly. It is important to have the family's continued agreement to*

*follow the safety plan, so please be sure to have an end date and to talk with the family when the plan is updated.*

- 50% or 8 out of 16 safety plans addressed how it is all going to work and how the actions are going to control for safety.
- 31% or 5 out of 16 of the safety plans contained caregiver promissory commitments.  
*(Note: This question uses a reverse scale: Lower number is better as we do not want the safety plans to contain caregiver promissory commitments).*
  - *Reviewer Comments:*
    - *Who makes arrangements for the in home safety service provider when grandma is unable to assist? Mom is left in charge of supervision, need to discuss further in the Safety Threat...describe how the threat presents itself and why mom is able to supervise, in the past she has left dad in charge of supervision.*
    - *The safety plan seems to rely on Lori (child's mother) to call 911 if child's father drinks and also states that she will ensure that he takes his medication. It does not appear that she was capable of controlling the father's behaviors resulting in the child being unsafe.*
- 50% or 8 out of 16 safety plans involved in home services.
- While all 16 safety plan forms addressed the oversight question, only 63% or 10 out of 16 safety plans contained sufficient oversight requirements to assure that the plan was implemented in accordance with expectation and was assuring child safety.
  - *Reviewer Comments: Please note that per policy, the-safety plan must be monitored no less than once a week prior to the completion of the assessment and monitoring should involve face to face contact with the child and family and phone calls to safety plan participants.*
- When applicable, each safety plan was adjusted by the worker when threats increased or decreased

#### **Protective Capacity Assessment (Chart 9):**

- At the time of the reviews, only one out of the 16 applicable assessments contained a finalized copy of the Protective Capacity Assessment (PCA). This PCA identified caregiver enhanced protective capacities but did contain information to reflect that a consensus was reached between the worker and the family about what must change.
  - *Reviewer Comments: As a reminder, the begin date for the PCA is to be within 7 days of the completion of the safety assessment. The PCA should be completed and documented on N-FOCUS within 60 days of initial custody date or 60 days from the begin date of the initial safety assessment, which ever is sooner.*

#### **Conditions of Return (Chart 9):**

- At the time of the reviews, only 2 out of the 10 applicable assessments included a finalized copy of the Conditions of Return. Both Conditions of Return forms included information on what specific behaviors must be present in the home to ensure and sustain safety.
  - *Reviewer Comments: Conditions of Return are to be started for all children likely to be out of the home longer than 30 days as soon as we know enough about the family to make decisions (this usually means the PCA has been started) and when the family has begun making changes and demonstrating that they are going to make progress. It needs to be completed and documented on N-F within 60 calendar days of removal.*

***NOTE:** The QA tool does not assess whether or not the worker met their time frame in documenting the PCA or the Conditions of Return on N-FOCUS. The QA team only reviews the quality of the PCA and the Conditions of Return if it is finalized on N-FOCUS at the time of the review.*

## SUMMARY

Data collected from 2<sup>nd</sup> Round of reviews in the Northern Service Area indicated the following:

### Strengths:

- \* 100% of the time the reviewer agreed with the worker's assessment of Present Danger.
- \* 100% of the time the reviewer agreed with the worker's determination that the child was UNSAFE.
- \* 94% of the time the reviewer's agreed with the worker's identification of safety threats.
- \* 94% of the time workers interviewed all non maltreating caregivers.
- \* 91% of the assessments contained enough information in the maltreatment section.
- \* 89% of the time the reviewer agreed with the worker's determination of impending danger at initial contact.
- \* 88% of the time worker interviewed all other children in the household.
- \* 88% of the time the worker provided sufficient justification for each threshold criteria when identifying safety threats.
- \* 86% of the time the worker interviewed all maltreating caregivers.
- \* 86% of the time the worker collected and incorporated collateral information when necessary.

While there continues to be a need for improvement in the other areas that were assessed, a comparison of the data collected from Rounds 1 and 2 of QA reviews indicate the following:

### Areas showing an increase in percentage achieved:

#### Initial Response:

- Initial contact was made with all child victims within required timeframe.
- Justification was provided to justify why other children in the household were NOT interviewed.
- Non maltreating caregiver(s) were interviewed.

#### 6 Domains/Collateral Info/Identification of Relatives/ICWA

- Sufficient information was gathered in the Maltreatment section.
- Sufficient information was gathered in the Nature section.
- Sufficient information was gathered in the adult functioning section.
- Collateral information was collected when necessary.
- Worker identified maternal relatives
- Worker identified paternal relatives

#### Safety Evaluation

- Reviewer agrees with the worker that child is UNSAFE.
- Reviewer agrees with worker on safety threats – safety factors marked “YES”
- Documentation contained justification for identification of impending danger (threshold criteria).

#### Safety Plan:

- Suitability of safety plan participant(s) was completed and contained sufficient information.
- Safety plan addressed “WHO”
- Safety plan addressed “WHAT”
- Safety plan addressed “WHERE”
- Safety plan addressed “HOW”
- Safety plan involved in home services.
- Safety plan ran continuously as long as safety threats are present.
- Safety plan adjusted as threats increased or decreased.
- Safety plan contained a sufficient oversight requirement.
- **Please note that there was an increase in percentage for the following items --- However, an INCREASE in percentage is NOT desirable for these items.**
  - \*Safety plan contained caregiver promissory commitments.
  - \*An in home safety plan was not utilized but should have been considered/utilized.
  - \*An out of home safety plan was not utilized but should have been considered/utilized.

## Areas showing a **decrease** in percentage achieved:

### Initial Response:

- All other children in the household were interviewed.
- All other adults in the household were interviewed.
- Maltreating caregiver was interviewed.
- Interview protocol was followed and if not followed, there was documentation on the reason for the deviation.

### 6 Domains/Collateral Info/Identification of Relatives/ICWA

- Sufficient information was gathered in the child functioning section.
- Sufficient information was gathered in the parent discipline section.
- Sufficient information was gathered in the general parenting section.
- ICWA information was obtained.

### Safety Evaluation

- Sufficient information – provide understanding of family members & their functioning.
- Sufficient information – justify decision making
- Sufficient information – to assess ALL 14 safety factors.
- Reviewer agrees with worker on safety factors “NO”
- Reviewer agrees with the worker that the child is SAFE.

### Safety Plan:

- Safety plan contained a sufficient/appropriate contingency plan.
- Overall safety plan was judged by reviewers to be appropriate.
- Safety plan addressed “WHEN”

## Other Comments:

**Protective Capacity Assessments & Conditions of Return** *The QA tool does not assess whether or not the worker met their time frame in documenting the PCA or the Conditions of Return on N-FOCUS. The QA team only reviews the quality of the PCA and the Conditions of Return if it is finalized on N-FOCUS at the time of the review.*

Round 1: There were no finalized PCA or Conditions of return found on N-FOCUS at the time of the reviews.

Round 2:

\* At the time of the reviews, only one out of the 16 applicable assessments contained a finalized copy of the Protective Capacity Assessment (PCA). This PCA identified caregiver enhanced protective capacities but did contain information to reflect that a consensus was reached between the worker and the family about what must change.

\* At the time of the reviews, only 2 out of the 10 applicable assessments included a finalized copy of the Conditions of Return. Both Conditions of Return forms included information on what specific behaviors must be present in the home to ensure and sustain safety.

**Supervisory Checklist Review:** The reviewers also assessed the case using the same questions included in the Supervisory Review Checklist in the Assessment. The results of these reviews can be found in **Table 1** in the attached excel document (*SESA Comparison Charts*).